

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	2 Serial/Patent # <u>08/157195</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/> Filing		1	08/12/93
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
		7 TOTAL AMOUNT OF REFUND	<u>120</u>
8 TO BE REFUNDED BY:			
<input type="checkbox"/> Overpayment		Treasury Check	
<input type="checkbox"/> Duplicate Payment		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
No Fee Due (Explanation):  <i>EPO SEARCH</i>		, <u>23-0783</u>	
11 REFUND REQUESTED BY: <u>V. Wallace</u>			
TYPED/PRINTED NAME:		TITLE: <u>Paralegal</u>	
SIGNATURE: <u>Vonette Wallace</u>		PHONE: <u>305-3765</u>	
OFFICE: <u>PTO</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>Janice</u>		DATE: <u>6/3/94</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
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Crystal Park One, Room 802B